

# AN ANALYSIS OF PUNITIVE INCOME SUPPORT POLICIES AND THE IMPACTS ON BIRTHING PARENTS WHO USE SUBSTANCES



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## INTRODUCTION

Birthing people who use substances (BPWUS) in Canada face increasingly high levels of poverty, stigma, and interaction with child protective services (CPS). When CPS removes a child from the home, income supports associated with that child are also removed and redirected to the province to pay for foster care or kinship arrangements. What is less understood is how regulations in income support policies contribute to family destabilization at a particularly vulnerable time. Reducing or removing income supports linked to child custody from the BPWUS when a child is apprehended by CPS threatens their basic needs, their ability to focus on recovery, and to meet the requirements for reunification. This punitive approach may delay or prevent reunification, increase the risk of intensified relapses, exacerbate trauma, result in the loss of housing, and in extreme cases, early death of the BPWUS. BPWUS are expected to mitigate the risk identified by CPS, with fewer financial resources, while dealing with the trauma of having their child apprehended.

## METHODS

The current policy analysis, told within the context of a fictional, albeit realistic, story, highlights how punitive regulations within income support programs, (i.e., Canada Child Benefit, Social Assistance, etc.) further destabilize families at a time when they need additional support to achieve reunification. Jamie's story highlights the system failures that contributed to her permanent separation from her children, retraumatization, and early death. Jamie's story is not unique, and mirrors the experiences of many clients in the Parent Child Assistance Program (PCAP) in Saint John, New Brunswick.

## RESULTS

Jamie was a mother to two young children, whom she adored. Jamie and the children's father had been in a long-term, but tumultuous relationship. Jamie had been smoking since age 10, started smoking marijuana at 12, moved on to cocaine at age 14, and eventually opiates. She experienced severe trauma and neglect as a child and had been in and out of foster care. Wanting better for her own children, Jamie left the abusive relationship, moved in with her mother briefly, and then, with support from her PCAP advocate, moved out on her own with her children. The lack of social support network and ongoing stressors meant that relapse was an ongoing risk. Jamie had a safety plan in case she had a relapse, which meant that the children would be safe and cared for until she returned. At a particularly vulnerable time, Jamie's ex-boyfriend helped arrange for childcare, provided her with cocaine, and then reported her to CPS. A urine test confirmed that Jamie had relapsed. This single relapse led to her children being removed from her care. As a result, Jamie lost access to the Canada Child Benefit, which was redirected to the province to pay for the children in foster care, and her Social Assistance income was reduced. Since her rent subsidy was linked to her previous income, she was now left with almost nothing for food and other bills. She lost her Public Housing unit shortly before the COVID-19 pandemic, which also halted her visits with her children indefinitely. Jamie soon relapsed, became homeless, and later died of cardiac arrest unrelated to an acute use of substances.

## CONCLUSION

Canada needs policy reform that prioritizes reunification, harm reduction, and keeping families together. The removal of income supports following child apprehensions is a punitive approach that increases hardship and trauma for the BPWUS and their children. This approach does not value the dignity of the family or the best interests of the child. Further, income insecurity exacerbates BPWUS's risk for various psychosocial outcomes, such as depression, anxiety, relapse, and suicidal ideation. A harm reduction and trauma-and-violence-informed approach to child protection and income support could prevent devastating consequences, ultimately saving lives and keeping families together.

No disclosures to declare

**PCAP**  
Parent Child Assistance Program

PCAP is a unique program that provides personalized support for women/birthing people who use substances by pairing them with an Advocate for three years. Advocates work with clients to identify, set, and achieve their goals. Together, Advocates and clients connect with community resources, and navigate complex systems to build the client's personal assets and autonomy.

Parents who use substances are more likely to experience adversity and feel isolated from their communities. The impact of this directly impacts their children, and the cycle continues. PCAP is only one part of the puzzle needed to disrupt this cycle. Our families need support from every aspect of their community. In the last year, we have watched our first clients graduate from the program. We are so excited for what the future holds for them.

PCAP Team: Holly Seale, Lead PCAP Advocate; Kelly Carline, PCAP Advocate; Hallie Merry, PCAP Advocate; Also Pictured: Joanna Beckett.

## REFERENCES



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